

**RECORD OF REQUEST FOR PURCHASE OF POLITICAL TIME  
CANDIDATE/AUTHORIZED COMMITTEE FORM  
(THIS FORM MUST BE COMPLETED FOR ALL REQUESTS [ORAL OR WRITTEN] AND PLACED IN  
POLITICAL AND PUBLIC INSPECTION FILE)**

**1. Date of Request:** 8/8/2016

**2. Name of Person making the Request :** Katelyn Brawn

**3. Address of Person making the Request:**

210 W Pennsylvania Ave, Suite 250, Townson MD, 21204

**4. Telephone Number of Person making the Request:**

410-825-7034

**5. Name of Candidate:** Jayer Williamson

**6. Name of Candidate's Authorized Committee:** Jayer Williamson Campaign

**7. Name of Treasurer of Committee:** Abby F. Dupree

**8. Legally-Qualified Candidate for the Office of:** State Representative in Florida

**9. Election:**

PRIMARY ELECTION      \_\_\_\_\_Y\_\_\_\_\_      Democrat \_\_\_\_\_      Republican \_Y\_\_\_\_\_      Other \_\_\_\_\_

GENERAL ELECTION      \_\_\_\_\_      Democrat \_\_\_\_\_      Republican \_\_\_\_\_      Other \_\_\_\_\_

CAUCUS      \_\_\_\_\_      Democrat \_\_\_\_\_      Republican \_\_\_\_\_      Other \_\_\_\_\_

**10. Information Requested:** \_\_\_\_\_

**11. Information Provided:** \_\_\_\_\_

**12. Request to Purchase Time:**    \_\_Y\_\_ ACCEPTED    \_\_\_\_\_ REJECTED

**13. If request to purchase time is GRANTED attach a copy of (i) the Agreement For Political Cablecasts, (ii) schedule of time purchased (including rates charged, class of time purchased), invoice and (iii) Affidavit of Performance indicating dates and times the advertisement aired.**

**Signed:** \_\_\_\_\_  
Signature of Individual Receiving Request

**Date:** \_\_\_\_\_

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